

RECEIVED
AUG 4 2008
INDUSTRIAL DEPARTMENT

NAME: CRAFT TEXTILE PRINTING CO., INC.
ADDRESS: P.O. BOX 2761, PATERSON, NJ 07509-2761
FACILITY LOCATION: 44 BEECH STREET, PATERSON, NJ 07501
NEW CUSTOMER ID/OUTLET ID: 27220136-1 OLD OUTLET DESIGNATION: 27100061


MONITORING PERIOD:	
<u>START</u>	<u>END</u>
7/1/2008	7/31/2008
mo/day/yr	mo/day/yr

.146

VOL. DISCHARGED THIS PERIOD	
145815	GALLONS
(CU FT X 7.48= GALLONS)	
Effluent Meter Reading Last Day This Period	
Not Applicable	


[illegible][illegible]

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT	Type Name And Title	Telephone No.
	H. R. Casparian President	973-278-3818
		Fax No.
		973-523-8677
		Date
		7/31/2008

PVSC FORM MR-2 REV. 3. 6/93

18
SEP 2008
2nd Input
Industrial Dept.



Calculation of Volume Discharged

Outlet #1

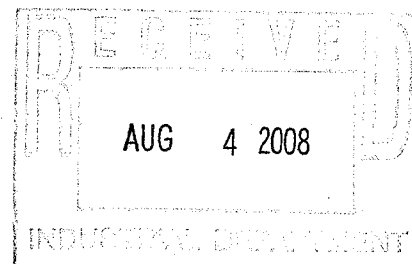
meter #	7/1/2008	7/31/2008	Cu Ft
70025595	10570480	10590920	20440
60094832	3453050	3453130	80
Total Cu Ft			20520
			*.95*7.48
			145815

Outlet #2

meter #	7/1/2008	7/31/2008	Cu Ft
60094869	449000	461880	12880
60094831	3505320	3512970	7650
60495152	1030	1030	0
Total Cu Ft			20530
			*.95*7.48
			145886

USER CHARGE SELF MONITORING REPORT

NAME: CRAFT TEXTILE PRINTING CO., INC.
ADDRESS: P.O. BOX 2761, PATERSON, NJ 07509-2761
FACILITY LOCATION: 44 BEECH STREET, PATERSON, NJ 07501
NEW CUSTOMER ID/OUTLET ID: 27220136-2 OLD OUTLET DESIGNATION: 27100062




MONITORING PERIOD:	
<u>START</u>	<u>END</u>
7/1/2008	7/31/2008
mo/day/yr	mo/day/yr

146

VOL. DISCHARGED THIS PERIOD	
145886	GALLONS
Effluent Meter Reading Last Day This Period	
Not Applicable	

[illegible][illegible]

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	H. R. Casparian President	973-278-3818
		Fax No.
		973-523-8677
		Date
		7/31/2008

PVSC FORM MR-2 REV. 2. 1/88

SEP 2008

Calculation of Volume Discharged

Outlet #1

meter #	7/1/2008	7/31/2008	Cu Ft
70025595	10570480	10590920	20440
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Outlet #2

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			145886



284 Sheffield Street, Mountainside, NJ 07092 Phone: 908-789-8900 Fax: 908-789-8922

Report of Analysis**Client:** Craft Textile Printing**Date Collected:** 7/1/2008**Project:** Permit Renewal 2008**Date Received:** 7/1/2008**Client Sample ID:** OUTLET-2**SDG No.:** Z3519**Lab Sample ID:** Z3519-02**Matrix:** WATER**% Solids:** 0.00

Analyte	Result	Qualifier	RL	Units	DF	Date Analyzed	Method
TSS	4.01		4.00	mg/L	1	7/2/2008	160.2 TSS
BOD5	6.90		2.00	mg/L	1	7/2/2008	405.1 BOD5

Comment

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284 Sheffield Street, Mountainside, NJ 07092 Phone: 908-789-8900 Fax: 908-789-8922

Report of Analysis

Client:	Craft Textile Printing	Date Collected:	7/1/2008
Project:	Permit Renewal 2008	Date Received:	7/1/2008
Client Sample ID:	OUTLET-1	SDG No.:	Z3519
Lab Sample ID:	Z3519-01	Matrix:	WATER
% Solids:	0.00		

Analyte	Result	Qualifier	RL	Units	DF	Date Analyzed	Method
TSS	88.00		4.00	mg/L	1	7/2/2008	160.2 TSS
BOD5	2.00	U	2.00	mg/L	1	7/2/2008	405.1 BOD5

Comment

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284 Sheffield Street, Mountainside, NJ 07092
(908) 789-8900 Fax (908) 789-8922
www.chemtech.net

CHEMTECH PROJECT NO
QUOTE NO 23519
COC Number 073294

CLIENT INFORMATION				CLIENT PROJECT INFORMATION				CLIENT BILLING INFORMATION			
REPORT TO BE SENT TO: COMPANY: <u>CRACK TEXTILE FINISHING CO.</u> ADDRESS: <u>P.O. Box 2761</u> CITY: <u>PATENTON</u> STATE: <u>NJ</u> ZIP: <u>01509</u> ATTENTION: <u>U.L. CASPARIAN</u> PHONE: <u>973-278-3818</u> FAX: <u>973-523-8677</u>				PROJECT NAME: PROJECT NO.: LOCATION: PROJECT MANAGER: e-mail: PHONE: FAX:				BILL TO: PO#: ADDRESS: CITY: STATE: ZIP: ATTENTION: PHONE:			
DATA TURNAROUND INFORMATION FAX: _____ DAYS: HARD COPY: _____ DAYS: EDD: _____ DAYS: PREAPPROVED TAT: <input type="checkbox"/> YES <input type="checkbox"/> NO STANDARD TURNAROUND TIME IS 10 BUSINESS DAYS				DATA DELIVERABLE INFORMATION <input type="checkbox"/> RESULTS ONLY <input type="checkbox"/> USEPA CLP <input type="checkbox"/> RESULTS + QC <input type="checkbox"/> New York State ASP "B" <input type="checkbox"/> New Jersey REDUCED <input type="checkbox"/> New York State ASP "A" <input type="checkbox"/> New Jersey CLP <input type="checkbox"/> Other _____ <input type="checkbox"/> EDD FORMAT _____				ANALYSIS ANALYSIS:			
PROJECT IDENTIFICATION CHEMTECH SAMPLE ID 1. <u>DUTLER #1</u> 2. <u>DUTLER #2</u> 3. 4. 5. 6. 7. 8. 9. 10.				SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY RECEIVED BY: <u>[Signature]</u> DATE/TIME: <u>7/1/08 11AM</u> RECEIVED BY: <u>[Signature]</u> DATE/TIME: <u>7/1/08 12:15</u> RECEIVED BY: <u>[Signature]</u> DATE/TIME: <u>7/1/08</u>				CONDITIONS OF BOTTLES OR COOLERS AT RECEIPT: <input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Non Compliant MeOH extraction requires an additional 4 oz jar for percent solid Cooler Temp. <u>5°C</u> Ice in Cooler? <u>YES</u>			
DATA DELIVERABLE INFORMATION <input type="checkbox"/> RESULTS ONLY <input type="checkbox"/> USEPA CLP <input type="checkbox"/> RESULTS + QC <input type="checkbox"/> New York State ASP "B" <input type="checkbox"/> New Jersey REDUCED <input type="checkbox"/> New York State ASP "A" <input type="checkbox"/> New Jersey CLP <input type="checkbox"/> Other _____ <input type="checkbox"/> EDD FORMAT _____				PRESERVATIVES 1 2 3 4 5 6 7 8 9 1. <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> 2. <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> <u>X</u> 3. 4. 5. 6. 7. 8. 9.				COMMENTS Specify Preservatives A-HCl B-HNO ₃ C-H ₂ SO ₄ D-NaOH E-ICE F-Other			
SHIPPED VIA: CLIENT: <input type="checkbox"/> HAND DELIVERED <input type="checkbox"/> OVERNIGHT CHEMTECH: <input checked="" type="checkbox"/> PICKED UP <input type="checkbox"/> OVERNIGHT Page <u>1</u> of <u>1</u>				SHIPMENT COMPLETE: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>							